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2 3 SEP 1964

MEMORANDUM FOR: Deputy Director for Support

SUBJECT   : Medical Staff Organizational Changes

1. This memorandum contains in paragraph 7 recommendations for the approval of the Deputy Director for Support.

2. Certain organizational changes are desirable for the Medical Staff. I have in recent months had occasion to refer to two of the three contemplated changes in some of my regular briefings for you. Briefly, the three essential changes are:

   a. Change of the title Medical Staff to "Office of Medicine".

   b. Establishment in the Office of Medicine of a separate element to monitor the development and operations of the Agency's field (over-seas ████████████████ medical program. This element should be headed by an experienced Agency Medical Officer.

   c. Establishment of the position of Executive Officer, Office of Medicine.
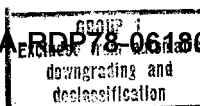
3. The Medical Staff is, as you know, the only "staff" in the Support Directorate. We know of no special reason why this should be, since in our judgment, we are rendering a support service parallel to those of the other support offices. Moreover, redesignation as the Office of Medicine would prevent the occasional confusion that results from having a staff within a staff, e.g., the Psychiatric Staff and the Assessment and Evaluation Staff are presently components of the Medical Staff. We suggest, therefore, that the Medical Staff be redesignated the "Office of Medicine" and the Chief, Medical Staff be redesignated as "Director of Medicine".

4. The element to be responsible for the field medical program -- which might be designated as the "Field Support Staff" of the Office of Medicine -- is necessary for appropriate continued development in this area. As you know, for the past several years this program has been directed out of my own immediate office. Program development has been satisfactory but it has now reached the stage where full-time professional direction is required if the full potential in this important area is to be exploited. The Field Support Staff (FSS), as I conceive it, would, for example, assure that the new competence and expertise that we have developed in the headquarters Medical Staff are more readily available to the field

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medical program. And, as another example, the FSS would assure that existing legislative authorities available to the medical program are applied with maximum benefit to Agency personnel serving overseas, or alternatively, that appropriate new authorities are recommended. I suggest that the FSS be established with a complement of three (3):

> Medical Officer (Chief)
> Administrative Officer
> Secretary-Stenographer

5. A full-time Executive Officer is now required by the Medical Staff to coordinate the several activities of the staff that are growing in scope and complexity. This official would concentrate in the areas of medical policy and budget, organization, and career planning. In all of these matters his frame of reference would be the Agency Medical Program in its entirety rather than merely the headquarters Medical Staff. I propose that a complement of two (2) would be appropriate for this function:

> Executive Officer
> Administrative Assistant

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6. I can make four of the above five new positions available from the positions currently allocated to the Medical Staff by reallocating and consolidating duties elsewhere in the staff. Indeed, as you may recall, we have since March 1964 been experimentally functioning with two of the proposed three employees devoting full time to field support and with our senior support officer functioning as Executive Officer. This has been by an internal realignment of Medical Staff duties not yet formalized by the Office of Personnel. Since our experience with these arrangements has been all favorable, it is now proposed that the changes be formalized. The attached chart (Attachment 1) depicts the "Office of Medicine" organization chart as it would appear after the proposed changes, with numerals indicating number of positions in each element. Attachment 2 outlines the proposed functions of the Chief, Field Support Staff, and Attachment 3 outlines the proposed functions of the Executive Officer.

7. Accordingly, it is recommended that:

a. The organization chart of the Medical Staff be revised to provide for:

(1) Redesignation of the Medical Staff as the Office of Medicine and the Chief, Medical Staff as the Director of Medicine.

(2) A Field Support Staff composed of:

> Medical Officer (Chief)
> Administrative Officer
> Secretary-Stenographer

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       (3) An Executive Officer element composed of:

              Executive Officer
              Administrative Assistant

       (4) Deletion of four (4) positions elsewhere in the Medical Staff:

         Support Division (3) and Office of the Chief, Medical Staff (1).

25X9   b. The authorized personnel ceiling of the Medical Staff be increased from ▓▓▓▓▓ by the addition of the position of Medical Officer, GSM-16, as Chief, Field Support Staff.

       c. The Medical Staff budget allocation be increased as follows to provide salary for this new position:

       (1) FY 1965 (½ year): $10,123

       (2) FY 1966   : $20,245

       8. Upon your approval of these recommendations, I shall request the Director of Personnel to assist us in effecting the necessary organizational changes.

                  Signed
                  John R. Tietjen, M.D.

                  JOHN R. TIETJEN, M.D.
                  Chief, Medical Staff

Attachments:
1. Proposed Office of Medicine Organization Chart
2. Proposed Functions of Chief, FSS
3. Proposed Functions of Executive Officer, Office of Medicine

The recommendations contained in Paragraph 7 are approved, subject to my memorandum of 28 October 1964.
      /s/ L. K. White

      L. K. WHITE   28 OCT 1964
      Deputy Director
      for Support   Date

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